



State of Rhode Island  
and Providence Plantations  
Office of the Secretary of State

A. Ralph Mollis, Secretary of State  
Corporations Division  
148 W. River Street  
Providence, RI 02904-2615  
401.222.3040

**LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2011**

**Filing Period:** September 1 - November 1 • **Filing Fee:** \$50.00\* • **THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.**

\*In accordance with R.I.G.L. 7-16-66 (d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66 (b&c)) is subject to a penalty fee of \$25.00.

1. ID No. <b>146796</b>		2. Exact name of the limited liability company <b>Capco Endurance, LLC</b>			
3. State of Formation <b>Rhode Island</b>		4. Brief description of the character of the business which is actually conducted in Rhode Island <b>Holding company.</b>			
5. Principal office address <b>33 Acorn Street</b>			City <b>Providence</b>	State <b>RI</b>	Zip <b>02903</b>
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OF CONTACT PERSON					
Contact Name <b>Michael J. Caparco, Sr.</b>			Contact Title <b>Chief Executive Officer</b>		
Street Address <b>33 Acorn Street</b>			City <b>Providence</b>	State <b>RI</b>	Zip <b>02903</b>
7. NAME AND ADDRESS OF EACH MANAGER OF THE LIMITED LIABILITY COMPANY (IF APPLICABLE) DO NOT LIST MEMBERS. (IF MAIN SPACES HERE ARE USING ATTACHMENTS, CHECK BOX FOR ATTACHMENT) <input type="checkbox"/>					
Manager Name <b>Michael J. Caparco, Sr.</b>			Manager Name <b>Patricia G. Caparco</b>		
Street Address <b>33 Acorn Street</b>			Street Address <b>33 Acorn Street</b>		
City <b>Providence</b>	State <b>RI</b>	Zip <b>02903</b>	City <b>Providence</b>	State <b>RI</b>	Zip <b>02903</b>
Manager Name <b>Michael J. Hullinger</b>			Manager Name <b>John McDonough</b>		
Street Address <b>33 Acorn Street</b>			Street Address <b>33 Acorn Street</b>		
City <b>Providence</b>	State <b>RI</b>	Zip <b>02903</b>	City <b>Providence</b>	State <b>RI</b>	Zip <b>02903</b>
8. RESIDENT AGENT IN RHODE ISLAND					
This information is currently of record in the Office of the Secretary of State. Changes require filing of Form 642 - R.I.G.L. 7-16-11					

RECEIVED  
 SECRETARY OF STATE  
 CORPORATIONS DIV  
 2011 OCT 21 PM 1:40

This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

**FILED**

File Date  
**OCT 21 2011**

Check No.

By: **BY C 161881**

FOR SECRETARY OF STATE

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

*Michael J. Caparco* 9/21/11  
 Signature of Authorized Person Date

**Michael J. Caparco, Sr., Chief Executive Officer**

Print or Type Name of Authorized Person